

ISSUE SLIP STAPLE AREA ((or additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Sm</i>		<i>9/19/65</i>
O.I.P.E. CLASSIFIER		<i>42</i>	<i>9/22/65</i>
FORMALITY REVIEW		<i>211</i>	<i>8/22/65</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ----- Rejected N ----- Non-elected
 □ ----- Allowed I ----- Interference
 - (Through numeral)... Canceled A ----- Appeal
 + ----- Restricted O ----- Objected

Claim	Final	Original	Date
1	✓	✓	✓
2	✓	✓	✓
3	✓	✓	✓
4	✓	✓	✓
5	✓	✓	✓
6	✓	✓	✓
7	✓	✓	✓
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

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